

UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF WASHINGTON  
AT TACOMA

C. P., by and through his parents, Patricia  
Pritchard and Nolle Pritchard, S.L., by and  
through her parents, S.R. and R.L.;  
EMMETT JONES, individually and on  
behalf of others similarly situated; and  
PATRICIA PRITCHARD, individually,

Plaintiffs,

v.

BLUE CROSS BLUE SHIELD OF  
ILLINOIS,

Defendant.

JUDGMENT BY THE COURT

CASE NO. 3:20-cv-06145-RJB

**XX** **DECIDED BY THE COURT.** This action came to consideration before the Court. The issues have been considered and a decision has been rendered.

The Court has ordered that:

The class is entitled to declaratory relief as follows:

Blue Cross, its agents, employees, and successors, including Health Care Service Corporation (of which Blue Cross is a division), violated Section 1557 of the Affordable Care Act, 42 U.S.C. § 18116(a), and discriminated on the basis of sex against Plaintiffs C.P., S.L., and Jones, and the Plaintiff Class when it administered and enforced categorical exclusions of some or all gender-affirming health care services as they are defined in the class definitions. As a “health program or activity” subject to Section 1557, Blue Cross cannot discriminate in any of its activities, including but not limited to, its activities as a third-party administrator.

The class is entitled to a prospective injunction prohibiting Blue Cross from applying the discriminatory exclusions in the future as follows:

Blue Cross, its agents, employees, successors, including the Health Care Service Corporation, are hereby PERMANENTLY ENJOINED from administering or enforcing exclusions and any policies or practices that wholly exclude or limit coverage of “gender-affirming health care,” so long as it is a “health program or activity” under the ACA’s Section 1557, 42 U.S.C. § 18116(a).

The retrospective class is entitled to an injunction setting forth equitable tolling of the time limits to make claims or file appeals set out in their plans and for reprocessing. Those injunctions are as follows:

Blue Cross is enjoined from applying the original time limits in Class members’ health plans for submitting claims or appealing adverse benefit determinations, but only as to claims for gender-affirming health care that were denied based solely on the exclusions of gender-affirming health care services during the Class period. Class members will have 90 days from the date the Class notice is submitted to class members, to submit claims for gender-affirming care that were denied for pre-authorization and/or post-service based solely upon the exclusions for gender-affirming care.

Blue Cross shall accept and process these claims consistent with the remaining terms of the plans, the Administrative Services Agreements, other contracts, and indemnification agreements, subject to this Order and without administering the exclusions.

The class is entitled to court-approved notice of this case to class members at Blue Cross’s expense.

The named Plaintiffs are each entitled to nominal damages of \$1.00 for processing this case to success for the class.

Dated this 22<sup>nd</sup> day of January 2024.

Ravi Subramanian  
Clerk of Court

  
Gretchen Craft, Deputy Clerk

